

862.C1795



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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Not Yet Assigned
ATSUSHI NAKAMURA ET AL.)	
	:	Group Art Unit: 2781
Application No.: 09/490,448)	
	:	
Filed: January 24, 2000)	
	:	
For: INFORMATION PROCESSING)	
APPARATUS, INFORMATION	:	
PROCESSING SYSTEM, AND)	
METHOD THEREFOR	:	April 6, 2000

Assistant Commissioner for Patents
Washington, D.C. 20231

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TC 2700 MAIL ROOM

REQUEST FOR CORRECTED FILING RECEIPT

Applicants' attorneys have received an official Filing Receipt in the above-identified application in which the address of the first inventor incorrectly reads "Kanagaawa-ken, JAPAN". The address of the second inventor should read as follows:

--Kanagawa-ken, JAPAN--.

Issuance of a corrected Filing Receipt, corrected as shown above, is accordingly respectfully requested.

Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants

Registration No. 28,296

FITZPATRICK, CELLA, HARPER & SCINTO
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NY_MAIN 74088 v 1

FILING RECEIPT ☐

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UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/490,448	01/24/2000	2781	1926	862.C1795	42	41	14

FITZPATRICK CELLA HARPER & SCINTO
30 ROCKEFELLER PLAZA
NEW YORK, NY 10112

Date Mailed: 03/28/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Atsushi Nakamura, Kanagawa-ken, JAPAN;
Koji Fukunaga, Tokyo, JAPAN;
Makoto Kobayashi, Kanagawa-ken, JAPAN;

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Continuing Data as Claimed by Applicant

Foreign Applications

JAPAN 11-016331 01/25/1999
JAPAN 11-192300 07/06/1999

If Required, Foreign Filing License Granted 03/28/2000

Title

Information processing apparatus, information processing system, and method therefor

Preliminary Class

710

Data entry by : HARDY, EUGENIA

Team : OIPE

Date: 03/28/2000



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 Washington, DC 20231
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Bib Data Sheet

CONFIRMATION NO. 7161

SERIAL NUMBER 09/490,448	FILING DATE 01/24/2000 RULE	CLASS 710	GROUP ART UNIT 2189	ATTORNEY DOCKET NO. 862.C1795	
APPLICANTS Atsushi Nakamura, Kanagawa-ken, JAPAN; Koji Fukunaga, Tokyo, JAPAN; Makoto Kobayashi, Kanagawa-ken, JAPAN;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS ***** JAPAN 11-016331 01/25/1999 JAPAN 11-192300 07/06/1999					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/28/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY JAPAN	SHEETS DRAWING 42	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 14
ADDRESS 5514					
TITLE Information processing apparatus, information processing system, and method therefor					
FILING FEE RECEIVED 2056	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		